



Utah State Tax Commission

REQUIREMENTS FOR OBTAINING A MOTOR VEHICLE DEALER LICENSE IN UTAH

TC-300
Rev. 6/99

PRINCIPAL PLACE OF BUSINESS

You must have a site or location in Utah that complies with all local ordinances, including zoning for motor vehicle sales and is devoted exclusively to the sale of motor vehicles and business incidental to it. The site must be sufficiently bounded by fence, chain, posts, or otherwise marked to definitely indicate its boundaries. There must be enough display space for at least three vehicles. There must be a permanent, enclosed building or structure large enough to accommodate the office of the dealership and this office must contain a safe place to keep the books and other records of the business. You must conduct the principal portion of the dealership's business from this location and you must also keep the dealership's books and records there. The Principal Place of Business must not share any common area with another dealer, auction, dismantler, or manufacturer or any business or activity not directly related to motor vehicle commerce.

SIGN

A permanent sign, not less than 24 square feet in size must be either painted on the dealership office, attached to the office with nails or bolts, or placed on posts in the display yard that have been securely anchored in the ground. The sign must fully identify the dealer's Principal Place of Business and show the full name of the dealership as they are licensed and the dealer number assigned to them. A picture of the Principal Place of Business and sign should be submitted to MVED along with the application forms and fees.

BOND

Dealers must file with MVED a corporate surety dealer bond.

New or Used Motor Vehicle Dealers \$50,000

Motorcycle or Small Trailer Dealers \$1,000

SALES TAX LICENSE

Dealers must furnish proof that they have a valid sales tax license for the sale of motor vehicles. MVED can assist you in obtaining forms and filing for the Sales Tax License.

PHOTOGRAPHS

Include photographs of owner, partners or corporate officers desiring a no fee salesperson license.

FINGERPRINTS AND WAIVER

Each person who is listed as an owner, corporation officer, partner or member, must submit a completed fingerprint card and waiver form with a \$15.00 fee.

FRANCHISE

All applicants seeking a New Motor Vehicle Dealer License are required to submit a letter from the Manufacturer authorizing you to sell a specific make or model.

FEES

License fees are as follows:

New Motor Vehicle Dealer \$125

Used Motor Vehicle Dealer \$125

Motorcycle or Small Trailer Dealer \$50

Dealer Plates (If desired) \$11.50 each

APPLICATION FORM

The application for a dealer license must be properly completed, signed and notarized. Applications, fingerprint cards, waivers, bond, picture of the sign and principal place of business, and fees must be submitted for approval to the Motor Vehicle Enforcement Division, 210 North 1950 West, Salt Lake City, Utah 84134. Please allow one week after the application is received by MVED for on-site inspection of the place of business and license approval.

ORIENTATION

Those new to the motor vehicle sales industry in Utah will be required to attend an 8 hour seminar covering important laws and requirements pertaining to dealers. The Dealer License is usually issued to the applicant immediately following the seminar.

- All applicants will need to file their trade name with the Department of Commerce, 160 East 300 South, Salt Lake City, Telephone 532-6935.
- Licensees who finance their sales in-house must file notification under the Utah Consumer Credit Code with the Department of Financial Institutions, 324 South State, Suite 201, Salt Lake City, Telephone 538-8830.
- Dealers who sell manufactured (mobile) homes should contact the Department of Commerce, 160 East 300 South, Salt Lake City, Telephone 530-6727.

Utah State Tax Commission

Bonded Motor Vehicle Business Application

TC-301
Rev. 3/97

Dealer number: _____

Application date: _____

Complete entire form and return it to the Motor Vehicle Enforcement Division at:
210 North 1950 West, Salt Lake City, Utah 84134, Telephone (801) 297-2600

Sales tax number: _____

I am familiar with the statutes and rules governing the conduct and operations of motor vehicle dealers and will cooperate with the Utah State Tax Commission to eliminate abuses and unfair trade practices.

Business organization

- ☐ Sole Proprietorship ☐ LLC
☐ Partnership ☐ LLP
☐ Corporation ☐ Trust

License type

- ☐ New motor vehicle dealer (\$125) ☐ New motorcycle and/or new small trailer dealer (\$50)
☐ Used motor vehicle dealer (\$125) ☐ Used motorcycle and/or used small trailer dealer (\$50)
☐ Bodyshop (\$110) ☐ Additional location (\$25 each)

Dealership name _____ Telephone number _____

Principal place of business street address _____

City _____ State _____ ZIP code _____

Bond company _____ Bond number _____ Effective date _____

Addresses of additional locations of this business operated in Utah (attach additional sheet(s) if necessary) (\$25 fee for each location)

Street address _____	Lot # _____	Street address _____	Lot # _____
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City _____	ZIP code _____	City _____	ZIP code _____
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Street address _____	Lot # _____	Street address _____	Lot # _____
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City _____	ZIP code _____	City _____	ZIP code _____
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Owner(s), partner(s), or corporate officers information (attach additional sheet(s) if necessary)

Name _____	Title _____	Home phone _____
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Home address _____	Social security number _____	Driver's license number _____
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City _____	State _____	ZIP code _____	Date of birth _____
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Hair color _____	Eye color _____	Height _____	Weight _____	Gender _____
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Name _____	Title _____	Home phone _____
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Home address _____	Social security number _____	Driver's license number _____
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City _____	State _____	ZIP code _____	Date of birth _____
------------	-------------	----------------	---------------------

Hair color _____	Eye color _____	Height _____	Weight _____	Gender _____
------------------	-----------------	--------------	--------------	--------------

Name _____	Title _____	Home phone _____
------------	-------------	------------------

Home address _____	Social security number _____	Driver's license number _____
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City _____	State _____	ZIP code _____	Date of birth _____
------------	-------------	----------------	---------------------

Hair color _____	Eye color _____	Height _____	Weight _____	Gender _____
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Previous employment during the last ten years (attach additional sheet(s) if necessary)

Business name	Beginning date	Ending date	
Street address	City	State	ZIP code
Business name	Beginning date	Ending date	
Street address	City	State	ZIP code
Business name	Beginning date	Ending date	
Street address	City	State	ZIP code

If you are a franchise dealer of new vehicles, RV's, motorcycles, and/or trailers, furnish required information below

Make	Name of manufacturer or distributor
Address of manufacturer or distributor	
Make	Name of manufacturer or distributor
Address of manufacturer or distributor	
Make	Name of manufacturer or distributor
Address of manufacturer or distributor	
Make	Name of manufacturer or distributor
Address of manufacturer or distributor	

Banks and other financial institutions or persons that will be financing vehicles for the dealership

Bank, financial institution or person's name			Bank, financial institution or person's name		
Street address			Street address		
City	State	ZIP code	City	State	ZIP code

1. Has anyone connected with the ownership or management of the dealership ever been the holder of a motor vehicle salesperson, dealer, dismantler, or auction license? ☐ No ☐ Yes, give business name: _____
2. Has the license mentioned above ever been denied, suspended or revoked? ☐ No ☐ Yes, give details: _____
3. Has anyone connected with the ownership or management of the dealership ever been employed by a dealer whose license was suspended or revoked? ☐ No ☐ Yes, give details: _____
4. Has anyone connected with the ownership had any court action, civil or criminal, filed against them during the past ten years in any District, Circuit, Justice of the Peace, or Federal Court of this or any other State? ☐ No ☐ Yes, give details: _____

I am familiar with the statutes and rules governing the conduct and operations of motor vehicle dealers and will cooperate with the State Tax Commission to eliminate abuses and unfair trade practices.

I do solemnly swear (or affirm) that the statements set forth in the foregoing application are true and correct and that I, as owner, as a member of the partnership, or as an officer of the corporation, have authority to sign this application and to make the statements set forth herein.

STATE OF UTAH
COUNTY OR CITY OF

(Firm name)

Signature of owner, partner, or corporate officer

Title

Subscribed and sworn to before me this _____ day of _____, 19 _____.

(Notary Public)

My Commission Expires _____



UTAH STATE BUSINESS AND TAX REGISTRATION

TC-69
Rev. 7/98

Utah Department of Commerce Registration

If you are filing a Limited Liability Partnership, Articles of Incorporation, Certificate of Limited Partnership, or Articles of Organization for a Limited Liability Company, use this form only if you also need state tax numbers.

☐ **Business Name Registration (DBA - Doing Business As)**

- ❖ If filing business name (DBA) to be owned by a limited liability partnership, corporation, partnership, or limited liability company, the owning entity must be qualified to transact business in Utah and have a Utah address.

- ❖ Section 1 must be completed by all entities.

\$20 FEE

Section 4 must also be completed by all entities except sole proprietors. **Make check payable to Utah Department of Commerce.**

Utah State Tax Commission Registration

- ❖ There is no charge to obtain a sales and use or employer's withholding tax number.

- ❖ Tax numbers cannot be issued without a Social Security Number (SSN) for sole proprietors with no employees, or a Federal Employer Identification Number (EIN) for all other entities. An EIN is required if applying for a withholding tax account.

Check all boxes below that apply and complete the corresponding sections.

☐ **Withholding** (If you pay wages or withhold tax from any payments)

- ❖ Sole Proprietor - complete Sections 1 and 2.
All other entities - complete Sections 1, 2, and 4.

- ❖ Check here to receive withholding tax information packet. ☐

NO FEE

☐ **Sales and Use Tax**

- ❖ If you are purchasing a business, Utah law requires you to withhold enough of the purchase money to cover any taxes due and unpaid until the former owner of the business produces a receipt from the Tax Commission showing that the taxes have been paid, or a certificate showing that no taxes are due. If you fail to withhold the required purchase money and the taxes remain due and unpaid 30 days after the business is sold, you will be personally liable for the payment of the taxes collected and unpaid by the former owner.

- ❖ Sole Proprietor - complete Sections 1 and 3.
All other entities - complete Sections 1, 3, and 4.
If you have multiple business locations, also complete Section 5.

- ❖ If you are a seller of lubricating oil, you may need a lubricating oil account, see Form TC-107.

- ❖ Check here to receive sales and use tax information packet. ☐

NO FEE

☐ **Use Tax Only** (Tax free purchases from outside Utah for storage, use or other consumption in Utah)

- ❖ Sole Proprietor - complete Sections 1 and 3.
All other entities - complete Sections 1, 3, and 4.
If you have multiple business locations, also complete section 5.

- ❖ Check here to receive sales and use tax information packet. ☐

NO FEE

☐ **Cigarette/Tobacco License** (ALL SALES, including retail sales of cigarettes with stamps affixed and/or tobacco products on which tax has been paid to a supplier)

- ❖ Single location - complete Section 1.
Multiple locations - complete Sections 1 and 5.

Filing Fee Per Location \$30
(includes reinstatements and suspension renewals)
Make check payable to Utah State Tax Commission

Persons or firms responsible for the collection of tobacco tax and purchase and application of cigarette stamps must post a surety bond. Minimum bond is \$500 for either cigarettes or tobacco, or \$1,000 for both.

☐ **Cigarette Stamper/Wholesaler** (Sales of cigarettes purchased without tax and resold after stamps are affixed.)

- ❖ Complete Section 1.

☐ **Tobacco Products Registration** (Sales of tobacco, other than cigarettes, on which tax has not been paid.)

- ❖ Complete Section 1.

Cigarette License and Bond Required

If registering name, return to:

Department of Commerce
DIVISION of CORPORATIONS
P.O. Box 146705
Salt Lake City, Utah 84114-6705
For assistance call, (801) 530-4849
Fax number (801) 530-6438

If this application is for a tax account only and you are already registered with the Department of Commerce, return to:

UTAH STATE TAX COMMISSION
210 North 1950 West
Salt Lake City, Utah 84134
For assistance, call (801) 297-2200 or
toll free 1-800-662-4335; fax number (801) 297-7579

Section 1 – General Information

Type of Ownership ☐ Individual/Sole Proprietor ☐ Corporation ☐ Limited Partnership ☐ Business Trust
(Must check one) ☐ Limited Liability Company ☐ Partnership ☐ Limited Liability Partnership ☐ S Corp (Include copy of IRS approval letter)

CO#
DBA#
LP#
LC#
Office use only

*** REQUIRED FIELDS — Application cannot be processed unless ALL required fields are completed.**

* Commerce Charter Number or DBA Registration Number:

Tax numbers cannot be issued without a federal taxpayer identification number as follows:

Social Security Number (for individual sole proprietor with no employees)

* - -

Federal Employer Identification Number (EIN) (for all other entities)

* -

Owner's name (If the owner is a business entity, write the entity's registered name here)

Day telephone number

*

*

Owner's street address

Office use only

*

City

County

State

Zip code

*

*

*

Business name to be registered

Business telephone number

*

*

Business street address (P.O. box not acceptable)

Office use only City/County Code

*

City

County

State

Zip code

*

*

*

Business mailing address (write "same" if same as business address above)

☐ Check box, if billing statements should be sent to mailing address

*

City

State

Zip code

Describe in detail the specific nature of your business, product, and/or service

*

Office use only

SIC Code

Any person who has the authority to direct collecting, accounting, withholding, and/or paying taxes may be held liable for a penalty equal to taxes not paid to the State of Utah. Utah Code Ann. Section 59-1-302.

Signature of Authorized Applicant or Owner

Title

Date signed

*

*

*

Authorized signatures required: (Application cannot be accepted without original signature)

Sole Proprietor - The sole proprietor/owner.

General Partnership - Any general partners.

Limited Partnership - Any general partner.

Business Trust - The trustee/beneficiary.

Corporation - Any officer or registered agent authorized by the corporation.

Limited Liability Partnership (LLP) - Any general partner authorized by the LLP.

Limited Liability Company (LLC) - Any member or manager authorized by the LLC.

Section 2 – Withholding Information

* Will you have any employees in your business? * If yes, when will you start paying wages to the employees?

Yes ☐ No ☐

Month Day Year

If you are a sole proprietor with employees, enter your Employer Identification Number (EIN) here:

* -

Section 3 – Sales Information

For a Sales Tax License, check all boxes that apply.

Schedules

Department of Commerce

1. ☐ Sales of goods or services from a place of business located in Utah (see Section 5)
2. ☐ Sales of goods or services from more than one place of business located in Utah A
3. ☐ Sales of goods or services from a non-fixed place of business, such as vending machines B
or door-to-door sales, or goods or services shipped direct to Utah consumers from out-of-state locations by vendors that have established sales tax nexus within Utah. See item 5 for explanation of sales tax nexus.
4. ☐ Tax-free purchases by a real property contractor having material shipped directly to a Utah B
job site from an out-of-state location.
5. ☐ Sales of goods or services shipped via U.S. Mail or common carrier direct to a Utah consumer C
by an out-of-state vendor that HAS NOT established sales tax nexus within Utah. DO NOT mark this box if you checked any of the three preceding boxes. Checking this box may require you to complete an affidavit certifying that you have not established sales tax nexus within Utah. Sales tax nexus means you, the vendor, have established a contact or presence in Utah, that REQUIRES you to collect and remit Utah sales or use tax. See Tax Commission Publication 37, Business Activity and Nexus in Utah, for more information.
6. ☐ Motel, hotel, trailer court, campground, or other tourist accommodations T
7. ☐ Business location within the city limits of Alta, Boulder, Brian Head, East Green River, R
Green River, Kanab, Moab, Monticello, Panguitch, Park City, Springdale or Tropic
8. ☐ Retail sales of new tires (includes motor vehicle dealers, as part of vehicle sale) W
9. ☐ Tax free purchases from out-of-state for storage, use, or other consumption in Utah
10. ☐ Restaurant sales of prepared foods, tourism and/or short term (less than 30 days) F
rental or lease of motor vehicle

* When will you start selling?

Estimate your monthly sales subject to sales tax

Month	Day	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>

<input type="checkbox"/> \$1,000 or less	<input type="checkbox"/> \$1,001 to \$5,000
<input type="checkbox"/> \$5,001 to \$10,000	<input type="checkbox"/> Over \$10,000 (specify) \$ <input type="text"/>

Office Use Only

Date Received

Section 4 – Corporations/Limited and General Partnerships/Limited Liability Companies Limited Liability Partnerships/Business Trusts

Name, address, social security number and federal employer identification number are required.

Please list the officers, general partners, members, trustees or fiduciaries. Use additional sheets if necessary following the same format as shown below.

Name	Social Security Number	
Title	Federal Employer Identification Number	
Home address	Day telephone number	Office use only <input type="text"/>
City	State Zip code	
Name	Social Security Number	
Title	Federal Employer Identification Number	
Home address	Day telephone number	Office use only <input type="text"/>
City	State Zip code	
Name	Social Security Number	
Title	Federal Employer Identification Number	
Home address	Day telephone number	Office use only <input type="text"/>
City	State Zip code	

Section 5 Business Locations Fill out if you have additional business locations.

Please indicate all locations of this business in Utah. A "business location" means any place of business, branch, satellite office or outlet. Use additional sheets if needed following the same format as shown below. If any business location changes, notify the Tax Commission immediately.

Business name		Telephone number	Office use only <div><div></div><div></div></div> <div>City/County Code <div><div></div><div></div><div></div></div></div> <div>SIC Code <div><div></div><div></div><div></div><div></div></div></div> <div>USTC SIC Code <div><div></div><div></div><div></div><div></div></div></div>
Business address (P.O. Box not acceptable)			
City	State UT	Zip code	
If business product or service is different from Section 1, describe here for this location.			
Business name		Telephone number	Office use only <div><div></div><div></div></div> <div>City/County Code <div><div></div><div></div><div></div></div></div> <div>SIC Code <div><div></div><div></div><div></div><div></div></div></div> <div>USTC SIC Code <div><div></div><div></div><div></div><div></div></div></div>
Business address (P.O. Box not acceptable)			
City	State UT	Zip code	
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Business address (P.O. Box not acceptable)			
City	State UT	Zip code	
If business product or service is different from Section 1, describe here for this location.			
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Business address (P.O. Box not acceptable)			
City	State UT	Zip code	
If business product or service is different from Section 1, describe here for this location.			



Utah State Tax Commission
Application for Special Plates and Decals

TC-142
Rev. 3/96

Return application and fees to Utah State Tax Commission, Motor Vehicle Enforcement Division, 210 North 1950 West, Salt Lake City, Utah 84134.

Company name: _____ License number: _____
☐ Dealer ☐ Dismantler ☐ Manufacturer ☐ Transporter

As owner, partner, or corporate officer of the above noted company, I hereby make application to the Utah State Tax Commission for the following items:

_____ Dealer plates (\$11.50 each - including decal) \$ _____
_____ Motorcycle plates (\$11.50 each - including decal) \$ _____
_____ Dismantler, Manufacturer, or Transporter plates (\$9.50 each - including reflectorization) \$ _____
_____ Renewal decals for Dealer plates (\$10.00 each) \$ _____
_____ Renewal decals for Dismantler, Manufacturer, or Transporter plates (\$8.00 each) \$ _____

Additional instructions: _____

Decal number: _____
(Sign affidavit on reverse side)

Total \$ _____

TC-142.CDR Rev. 3/96

I, the undersigned, being first duly sworn, depose, and say that I have applied for a license to engage in the business shown on the reverse of this card; and I hereby make application for special license plates. The license plates will not be used on any vehicle other than the vehicles authorized under the provisions of the law.

I further certify, under penalty of law, that all vehicles operated, displaying such special plates, will be insured as prescribed by law.

Insurance company _____ **Policy number** _____

Address _____ **Telephone number** _____

STATE OF UTAH

County of _____

(Firm name)

Signature (must be signed by owner, partner, or corporate officer)

Title

Subscribed and sworn to before me this _____ day of _____, 19 _____.

My Commission Expires _____

(Notary Public)

TC-142.CDR Rev. 3/96

BOND NO. _____

BOND OF MOTOR VEHICLE DEALER, CRUSHER OR BODY SHOP

KNOW ALL PERSONS BY THESE PRESENTS: That we, _____

of (Street Address), _____

(City), County of _____, Utah, as Principal, and

_____ a Surety Company qualified and authorized to do

business in the State of Utah, and with a rating of at least B+ with the A. M. Best Company, as Surety, are jointly and severally held and firmly bound to the people of the State of Utah to indemnify persons, firms, and corporations for loss suffered by reason of violation of the conditions hereinafter contained, in the total aggregate sum of _____

Dollars (\$ _____), regardless of the number of claimants or the number of years a bond remains

in force, as required by Chapter 3, Title 41, Utah Code Ann. (1953, as amended), lawful money of the United States for the payment of

which, well and truly to be made, we bind ourselves, our heirs, executors, administrators, successors and assigns, jointly, severally and

firmly by these presents. The total aggregate liability on this bond to all persons making claims, regardless of the number of claimants or

the number of years a bond remains in force, may not exceed \$ _____, as set forth in

Chapter 3, Title 41, Utah Code Ann. (1953, as amended).

THE CONDITION OF THIS OBLIGATION IS SUCH, That,

WHEREAS, the above bounden Principal has applied for a license to do business as a _____

Motor Vehicle _____ within the State of Utah, and that pursuant to the application, a license

has been or is about to be issued.

NOW, THEREFORE, if the above bounden Principal shall obtain said license to do business as such _____

Motor Vehicle _____, and shall well and truly observe and comply with all requirements and

provisions of THE ACT PROVIDING FOR THE REGULATION AND CONTROL OF THE BUSINESS OF DEALING IN MOTOR

VEHICLES, as provided by Chapter 3, Title 41, Utah Code Ann. (1953, as amended), and indemnify persons, firms and corporations in

accordance with Chapter 3, Title 41, Utah Code Ann. (1953, as amended), for loss suffered by reason of the fraud or fraudulent

representations made or through the violation of any of the provisions of Section 41-3-210, so that the total aggregate liability on the

bond to all persons making claims, regardless of the number of claimants or the number of years a bond remains in force, may not

exceed \$ _____, as set forth in Chapter 3, Title 41, Utah Code Ann. (1953, as

amended), on account of fraud or fraudulent representation or for any violation or violations of said law during the time of said license and

all lawful renewals thereof, then the above obligation shall be null and void, otherwise to remain in full force and effect. Said bounden

Principal shall also pay reasonable attorneys' fees in cases successfully prosecuted or settled against the Surety or Principal if the bond

has not been depleted.

The Surety herein reserves the right to withdraw as such surety except as to any liability already incurred or accrued hereunder and may

do so upon the giving of written notice of such withdrawal to the Principal and to the Motor Vehicle Enforcement Division, provided,

however, that no withdrawal shall be effective for any purpose until sixty days shall have elapsed from and after the receipt of such

notice by the said Administrator, and further provided that no withdrawal shall in anywise affect the liability of said Surety arising out of

fraud or fraudulent representations or for any violation or violations of said laws by the Principal hereunder prior to the expiration of such

period of sixty days, regardless of whether or not the loss suffered has been reduced to judgement before the lapse of sixty days.

Signed and Sealed this _____ day of _____, _____.

Principal

_____, Surety

By _____

Attorney-in-Fact

Approved as to Form
Office of the Utah Attorney General
MVED-1 (Rev. 5-99)

INDIVIDUAL ACKNOWLEDGEMENT OF PRINCIPAL

STATE OF UTAH SS

COUNTY OF _____

On this _____ day of _____, in the year _____, before me personally appeared _____, to me known and known to me to be the person, and described in, and who executed the foregoing instrument, and acknowledged to me that he executed the same.

(SEAL)

Notary Public

LLC/LLP/PARTNERSHIP OR FIRM ACKNOWLEDGEMENT OF PRINCIPAL

STATE OF UTAH SS

COUNTY OF _____

On this _____ day of _____, in the year _____, before me personally appeared _____, to me known and known to me to be one of the firm of _____, described in, and who executed the same as and for the act and deed of said firm.

(SEAL)

Notary Public

CORPORATE ACKNOWLEDGEMENT OF PRINCIPAL (TO BE COMPLETED BY CORPORATION WITH CORPORATE SEAL)

STATE OF UTAH SS

COUNTY OF _____

On this _____ day of _____, in the year _____, before me personally appeared _____, to me known, who, being by me duly sworn, did depose and say: That he resides in _____, that he is _____ of the _____, the corporation described in and which executed the above instrument; that he knew the seal of said corporation, and that he signed his name thereto by like order.

(CORPORATE SEAL)

(NOTARY SEAL)

Notary Public

CORPORATE ACKNOWLEDGEMENT OF PRINCIPAL (TO BE COMPLETED BY LLC OR CORPORATION WITHOUT CORPORATE SEAL)

STATE OF UTAH SS

COUNTY OF _____

On this _____ day of _____, in the year _____, before me personally appeared _____, to me known, who, being by me duly sworn, did depose and say: That he resides in _____, that he is the _____ of the _____, the corporation which executed the above instrument and which is described therein; that he signed the above mentioned instrument on behalf of said corporation; that he was authorized to do so by Article _____ of the Articles of Incorporation of the said corporation, and by order of the Board of Directors of said corporation, and that his signature as it thus appears in the above instrument is binding upon the corporation.

(SEAL)

Notary Public

AFFIDAVIT OF QUALIFICATION

STATE OF UTAH SS

COUNTY OF _____

_____ being first duly sworn, on oath deposes and says that he is the _____ of said company, and that he is duly authorized to execute and deliver the foregoing obligations; that said company is authorized to execute the same and has complied in all respects with the laws of Utah in reference to becoming sole surety upon bonds, undertakings and obligations.

Subscribed and sworn to before me
this _____ day of _____ 19_____
My Commission expires: _____



Utah State Tax Commission

Waiver

TC-465
Rev. 5/97

I hereby ask that the criminal information requested be released to the **Utah State Tax Commission, Motor Vehicle Enforcement Division** and release the Utah State Bureau of Criminal Identification from any liability resulting from such request.

Signed

Date

Subscribed and sworn to before me this _____ day of _____, 19 _____.

Signature of notary public

Notary public for the state of

Commission expires

ORIGINAL - BCI

YELLOW - MVED

TC-465.CDR Rev. 5/97